## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 (571) 273-2885 The

or <u>Fax</u>

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

Note: A certificate of mailing can only be used for domestic mailings of the

24230 7	CE ADDRESS (Note: Use Block 1 for 590 10/19/2005	\o\'\	- Apr	Note: A certificate o Fee(s) Transmittal. T papers. Each addition have its own certifica	f mailing can only be used fi his certificate cannot be used hal paper, such as an assignment te of mailing or transmission.	or domestic mailings of the for any other accompanying ent or formal drawing, must
HARSHAW RESEARCH INCORPORATED P O BOX 418 OTTAWA, KS 66067			O 3 JOUR TH	I hereby certify that to States Postal Service addressed to the Matransmitted to the US	ertificate of Mailing or Trans this Fee(s) Transmittal is bein with sufficient postage for fir ail Stop ISSUE FEE address PTO (571) 273-2885, on the o	smission g deposited with the United sts class mail in an envelope above, or being facsimile date indicated below.
01/04/2006 HTECKLU2 000000	& THAT		Dale	J. Ream	(Depositor's name)	
01 FC:2501 700.00 <u>OP</u>		•		12 Headen	Ju-	(Signature)
02 FC:1504	300.00 OP			1/12	-29-05	(Date)
APPLICATION NO.	FILING DATE	FIRST NAMED INVE		NTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/735,386	12/12/2003	John F. Demsl		e	60682	1682
TITLE OF INVENTION: PORTABLE PILL CRUSHING DEVICE						
<u></u>						
APPLN, TYPE	SMALL ENTITY	ISSUE FEE		UBLICATION FEE	TOTAL FEE(S) DUE	DATE DÚE
nonprovisional	nonprovisional YES			\$300	\$1000	01/19/2006
EXAMINER		ART UNI	T (	CLASS-SUBCLASS		
FRANCIS, FAYE		3725		241-221000	_	
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Fee Address of metal address or indication (or "Fee Address" Indication form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/122) attached. Use of a Customer Number is required.  3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)  Tahn F. Dem Ske  Please check the appropriate assignee category or categories (will not be printed on the patent):  Above the appropriate of the fee(s) is enclosed.  A check in the amount of the fee(s) is enclosed.  A check in the amount of the fee(s) is enclosed.  A check in the amount of the fee(s) is enclosed.  A check in the amount of the fee(s) is enclosed.  Payment by credit card. Form PTO-2038 is attached.  A check in the amount of the fee(s) or credit any overpayment, to Deposit Account Number  (enclose an extra copy of this form).						
Authorized Signature  Typed or printed name	b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).  ion Fee (if any) or to re-apply any previously paid issue fee to the application identified above. If from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in Office.  Date 12-29-05  Registration No. 45 7 98  In is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and depending upon the individual case. Any comments on the amount of time you require to complete Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450,					
this form and/or suggestion Box 1450, Alexandria, Virg Alexandria, Virginia 22313	s tor reducing this burden, sl rinia 22313-1450. DO NOT -1450.	nould be sent to the SEND FEES OR C	OMPLETED FOR	MS TO THIS ADDRES	SS. SEND TO: Commissioner	for Patents, P.O. Box 1450,

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.